1403-128-0125

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

FORM 1	U	MUANIZA	ALION	i	(LOC. LC
				2014an	HULUSE BANYAM 8: 45
NAME OF COMMITTEE (in		(Check if name is changed)	Example:If typing, type over the lines.	12FE4M57E(MAIL CENTER
ZINKE VIC	TORY FUN	D			,
ADDRESS (number a		NIELLS BRIDGE RD	STE 121		
		<u> </u>		<u> </u>	
same is changed	ATHEN	S		GA 306 STATE ▲	ZIP CODE A
COMMITTEE'S E-MA	AIL ADDRESS		•		
(Check if a is changed	address _I PAUL(@PDSCOMPLIA	NCE.COM	1_1_1_1_1_1_1	
.o onange	Optional	Second E-Mail Add	tress	<u> </u>	
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		AND THE PROPERTY AND TH			
2. DATE 0	7 15	2014			
3. FEC IDENTIFIC	CATION NUMBER	· C			
4. IS THIS STATE	MENT 🗵 NEW	/ (N) OR	AMENDED (A)		
I certify that I have	examined this Statem	ent and to the best	of my knowledge and belief it	is true, correct and	i complete.
Type or Print Name	of Treasurer) 1 Kil	laare		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				(3-5	
Signature of Treasure	ar John	LAU		Date 0.7	15 2014
NOTE: Submission of	,		may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC	Form 1 (Revised 02/2009)	Page 2	
	COMMI			
Candid	Candidate Committee:			
(a)	This	committee is a principal campaign committee. (Complete the candidate information below.)		
(b)	224	committee is an authorized committee, and is NOT a principal campaign committee. (Commation below.)	plete the candidate	
Name of Candida	. L			
Candida Party Af		Office Sought: House Senate President	State	
(c)	This	committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candida	· L			
Party (ommitte	ee:		
(d)	This	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.	
Politic	l Action	Committee (PAC):		
(e)	This	committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected organization is a:	
		Corporation W/o Capital Stock	Labor Organization	
		Membership Organization Trade Association	Cooperative	
		In addition, this committee is a Lobbyist/Registrant PAC.		
(f)		s committee supports/opposes more than one Federal candidate, and is NOT a separate sumittee. (i.e., nonconnected committee)	egregated fund or party	
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joint F	ındraisi	ng Representative:		
(g)	This com	committee collects contributions, pays fundraising expenses and disburses net proceeds for traititees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political	
(h)		committee collects contributions, pays fundraising expenses and disburses net proceeds for to mittees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political	
(ommitte	es Participating in Joint Fundraiser		
	,ZII	NKE FOR CONGRESS	0550871	
:		NTANA REPUBLICAN STATE CENTRAL COMMITTEE	0008086	
•	, NA	TIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	0075820	
				
•	· LT		<u> </u>	

Page	3
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	te or Type Committee Name
Z	INKE VICTORY FUND
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
N	NE
l	
	Mailing Address
	CITY STATE ZIP CODE
	Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
' .	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee
	Full Name
	Mailing Address
	Title or Position CITY STATE ZIP CODE
	Telephone number
3.	Freasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).
	Full Name PAUL KILGORE
	of Treasurer Lilling Treasurer
	Vailing Address 2470 DANIELLS BRIDGE RD STE 121
	. A TUES 10
	ATHENS CITY STATE ZIP CODE
•	Fitle or Position TREASURER TREASURER Telephone number TREASURER

Full Name of Designated MICHAEL GOODE Agent 2470 DANIELLS BRIDGE RD STE 121 Mailing Address 2470 Label	
ATHENS CITY STATE ZIP CODE Title or Position ASSISTANT TREASURER Telephone number 706 - 534 - 7780	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	
SUNTRUST BANK PO BOX 4418 Mailing Address ATLANTA GA 30302	Ш Ш
CITY STATE ZIP CODE	
Name of Bank, Depository, etc. Mailing Address	
CITY STATE ZIP CODE	_

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2014 JUL 23 AM 8: 45
FEC MAIL CENTER

Federal Election Commission 999 E Street NW Washington, DC 20463

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Next Business [
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	eipt or Postmarked			
B	7/23/14			
PRÉPARER (8/2013)	DATE PREPARED			